2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000076813

Entity Name: MIA FINANCIAL GROUP LLC

FILED Oct 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2999 NE 191ST STREET

SUITE 803

AVENTURA, FL 33180

New Mailing Address: Current Mailing Address:

2999 NE 191ST STREET SUITE 803

AVENTURA, FL 33180 US

FEI Number: 65-1316900 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVID LEKACH P.A. ESQ. 2999 NE 191ST STREET SUITE 803 AVENTURA, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID LEKACH

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition DAVID LEKACH P.A. ES, Q DAVID LEKACH P.A. ES, Q Name: Name: 2999 NE 191ST STREET, SUITE 803 Address: 2999 NE 191ST STREET, SUITE 803 Address:

City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM () Delete Title: MGR (X) Change () Addition

NEUFELD, JASON Name: NEUFELD, JASON Name:

Address: 2999 NE 191ST STREET, SUITE 803 Address: 20801 BISCAYNE BLVD SUITE 403

City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition SCHEINKMAN TRUST III, Name: RICARDO SCHEINKMAN, Name:

Address:

2999 NE 191ST STREET, SUITE 803 Address: 20801 BISCAYNE BLVD SUITE 403 City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: AVENTURA, FL 33180 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID LEKACH 10/08/2008